HHS ANNOUNCES AGING AND DISABILITY RESOURCE CENTER GRANTS PROGRAM

A Grant Opportunity through the Administration on Aging (AoA) and Centers for Medicare and Medicaid Services (CMS)

Overview: This grants program will support state efforts to develop "one-stop shop" programs at the community level that will help people make informed decisions about their service and supports options, and serve as the entry point to the long term service and support system. States will be able to use these funds to better coordinate and/or redesign their existing systems of information, assistance and access, which currently involve multiple federal, state and local programs. The AoA and CMS initiative builds on existing "one-stop shop" programs in Wisconsin and other states. Up to 16 grants will be issued as cooperative agreements; the maximum grant award will be \$800,000 for a three-year period. AoA and CMS will jointly review proposals, issue grant awards and monitor grantee progress.

Eligible Applicants: States

Target Population: States must target the elderly population and at least one additional population (i.e., individuals with physical disabilities, serious mental illness, and/or mental retardation/developmental disabilities).

Functions: Aging and Disability Resource Center programs will be required to provide the following at the community level: Public Education; Information and Counseling on available options; Access to Public Programs, including Medicaid nursing facility care and waiver services; Coordination with Other Programs (e.g., disease prevention; nutrition, transportation, housing), and Prospective Planning to help people to plan ahead for their long term service and supports needs.

Flexibility: States will have broad flexibility in determining the configuration of their programs. Any state agency can be the lead state agency, although State Units on Aging and State Medicaid agencies must be involved in planning and implementation. States will also decide how best to organize Aging and Disability Resource Center functions at the local level. For example, some states may operate all local functions in one agency while others may use a decentralized approach involving multiple sites and organizations. Regardless of the configuration, states will have to ensure consumers are provided with uniform information and a standardized process for accessing programs and services.

Involvement of Consumers, Stakeholders and Public-Private Partnerships: States will be required to involve consumers and other stakeholders at the state and local level in the planning, implementation and evaluation of their Resource Center programs. In addition, states will be encouraged to develop public-private partnerships to carry out their programs.

Performance Goals and Measures: States must establish performance goals and indicators that will allow them to measure their progress in: helping consumers make informed decisions,

streamlining access to services and supports, and achieving system efficiency and cost-effectiveness.

For additional information on the grants program including application instructions, please visit the AoA website at http://www.aoa.gov or the CMS web site at http://www.cms.hhs.gov/newfreedom/default.asp.